



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 1014

<b>SERIAL NUMBER</b> 10/527,831	<b>FILING OR 371(c) DATE</b> 01/09/2006 <b>RULE</b>	<b>CLASS</b> 435	<b>GROUP ART UNIT</b> 1634	<b>ATTORNEY DOCKET NO.</b> 56182-316187
------------------------------------	---	---------------------	-------------------------------	--

**APPLICANTS**

Kathryn Nance North, Glebe, AUSTRALIA;

**\*\* CONTINUING DATA \*\*\*\*\***This application is a 371 of PCT/AU03/01202 09/15/2003 *sf***\*\* FOREIGN APPLICATIONS \*\*\*\*\***AUSTRALIA 2002951411 09/16/2002 *sf***\*\* SMALL ENTITY \*\***

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> AUSTRALIA	<b>SHEETS DRAWING</b> 1	<b>TOTAL CLAIMS</b> 32	<b>INDEPENDENT CLAIMS</b> 3
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials <i>sf</i>				

**ADDRESS**

35657

**TITLE**

Actn3 genotype screen for athletic performance

<b>FILING FEE RECEIVED</b> 880	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
-----------------------------------	---	---